



Application for Employment

We are an Equal Opportunity Employer. We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, disability, veteran status or any other legally protected status.

**** PLEASE PRINT LEGIBLY****

Applicant Information

First Name _____ Middle _____ Last _____

Street Address _____

City/State/Zip _____

E-Mail Address: _____ Phone (_____) _____

If hired, do you have a reliable means of transportation to get to work? (YES) (NO) Describe _____

Are you at least 18 years old? ___ If you are under 18 years of age, can you furnish a valid work permit? _____

Are you legally eligible for employment in the U.S.? (YES) (NO)

(Proof of U.S. citizenship or immigration status is required if hired.)

Have you ever been convicted of a crime? (YES) (NO)

If yes, state the nature of the offense and disposition of the case. Include dates and places. (NOTE: The existence of a criminal record does not constitute an automatic bar to employment.) _____

Employment Information

Position(s) applying for: _____ Salary Desired _____

How did you find out about this job? () Newspaper () Employee () Internet () Relative () Other _____

Why are you seeking a new job at this time? _____

Are you seeking full time, part time or temporary employment? _____

What shift(s) and days are you able to work? Place an "X" in the appropriate boxes below.

Leave the time and days you are not available to work blank in the chart below .

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
AM							
PM							

Are you willing to work Weekends? (YES) (NO) Holidays? (YES) (NO)

Are you currently employed? (YES) (NO) If hired, when would you be able to start? _____

List any friends or relatives employed by this company: _____

Have you ever been terminated or asked to resign from any position? (YES) (NO) If yes, please explain:

Please describe which tasks, if any, you will need accommodation to perform, and explain what type of accommodation you will need: _____

Education (circle highest level achieved)

Elementary: 1 2 3 4 5 6 7 8

Secondary: 9 10 11 12 G.E.D

College: 1 2 3 4 5 6 7 8

Name of School: _____

Name of School: _____

Name of School: _____

Location of School: _____

Location of School: _____

Location of School: _____

Other Education: _____

Degree & Major: _____

Work History (please begin with most recent)

Company _____	Phone Number: (_____) _____
Address _____	City/State/Zip _____
Dates of Employment: From _____ To _____	Salary: Beginning _____ Ending _____
Job Title _____	Supervisor's Name & Title _____
Describe duties briefly: _____	
Specific reason for leaving: _____	
Company _____	Phone Number: (_____) _____
Address _____	City/State/Zip _____
Dates of Employment: From _____ To _____	Salary: Beginning _____ Ending _____
Job Title _____	Supervisor's Name & Title _____
Describe duties briefly: _____	
Specific reason for leaving: _____	
Company _____	Phone Number: (_____) _____
Address _____	City/State/Zip _____
Dates of Employment: From _____ To _____	Salary: Beginning _____ Ending _____
Job Title _____	Supervisor's Name & Title _____
Describe duties briefly: _____	
Specific reason for leaving: _____	
May we contact the employers listed above? (YES) (NO)	
If no, list the employers you do not wish us to contact and why: _____	

Authorizations (please read carefully, then sign and date below)

I certify that I have personally completed this application. I declare that the information provided in this employment application is true and complete and I understand that any false information or significant omissions may disqualify me from further consideration for employment and may be justification for my dismissal from employment if discovered at a later date. I agree to immediately notify this company if I should be convicted of a crime while my job application is pending or during my employment, if hired.

I authorize this company to make an investigation of all information contained in this employment application and I release from liability all companies and corporations supplying such information. I understand any false answers, statements, or implications made by me on this application or other required documents shall be considered sufficient cause for denial of employment or discharge.

I hereby agree to submit to any drug test required of me, whether prior to my employment or if employed by this company at any time thereafter.

Signature _____ Date _____

Office Use

Screen Interview Date: _____ () Second Interview Date: _____ Hired Date: _____

Background Check (YES) (NO)

Interview Notes